Supplemental Application Data Sheet

Application Information

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Computer Readable Form (CRF)?::

No

Title::

COMPOUNDS FOR THE TREATMENT OF

HIV INFECTION

Attorney Docket Number::

060621-0703

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

N/A

Total Drawing Sheets::

0

Small Entity?::

Yes

Petition included?::

No

Secrecy Order in Parent Appl.?::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Justin T.

Family Name::

Ernst

City of Residence::

San Diego

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

3535 Lebon Drive, Unit 5105

City of mailing address::

San Diego

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92122

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Erik

Family Name::

Boman

City of Residence::

Bonita

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

3012 Plaza Natalia

City of mailing address::

Bonita

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

91902

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Spain

Status::

Full Capacity

Given Name::

Susana C.

Family Name::

Ceide

City of Residence::

San Diego

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

3941 Nobel Drive, #321

City of mailing address::

San Diego

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92122

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Spain

Status::

Full Capacity

Given Name::

Antonio G.

Family Name::

Montalban

City of Residence::

San Diego

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

8520 Costa Verde Blvd., #3306

City of mailing address::

San Diego

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92122

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Japan

Status::

Full Capacity

Given Name::

Hiroshi

Family Name::

Nakanishi

City of Residence::

San Diego

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

11094 Melton Court

City of mailing address::

San Diego

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92131

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

United Kingdom

Status::

Full Capacity

Given Name::

Edward

Family Name::

Roberts

City of Residence::

San Diego

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

4650 Corte Mar De Corazon

City of mailing address::

San Diego

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92130

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

France

Status::

Full Capacity

Given Name::

Eddine

Family Name::

Saiah

City of Residence::

La Jolla

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

7214 Eads Avenue

City of mailing address::

La Jolla

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92037

address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Christopher

Family Name::

Lum

City of Residence::

San Diego

State or Province of

CA

Residence::

Country of Residence::

US

Street of mailing address::

13384 Bayarian Drive

City of mailing address::

San Diego

State or Province of mailing

CA

address::

Postal or Zip Code of mailing

92129

address::

Correspondence Information

Correspondence Customer Number::	30542
E-Mail address::	PTOMailSanDiegoNorth@Foley.com

Representative Information

Representative Customer	30542	
Number::		

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/446,713	02/11/2003
This Application	An application claiming the benefit under 35 USC 119(e)	60/523,217	11/18/2003

Assignee Information

ssignee name::	Kemia, Ir
ssignee name::	Kemia